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7590 10/27/2004

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01/24/2005 RMEBRAH1 00000075 10800817

01 FC:2501 700.00 OP

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| | |
|-------------------------|--------------------|
| <i>Norman E. Lehrer</i> | (Depositor's name) |
| <i>Norman E. Lehrer</i> | (Signature) |
| January 14, 2005 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/800,817 | 03/15/2004 | John H. Rohlfing | 6196 | 1625 |

TITLE OF INVENTION: BIRD PERCH

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------------|------------|
| nonprovisional | YES | \$685 | \$0 | \$685 \$700 | 01/27/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------------------|----------|----------------|
| SHAW, ELIZABETH ANNE | 3644 | 119-537000 |

| | |
|---|---|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |
| <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | 1 <u>Norman E. Lehrer</u> 2 _____ 3 _____ |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Norman E. Lehrer* Date January 14, 2005
 Typed or printed name Norman E. Lehrer Registration No. 26,561

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